

Fill in this Information to identify the case:

Debtor 1 Crystal Irene (Wood) Pennington
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Middle District of Pennsylvania

Case number: 20-03630

FILED

September 15, 2022

Clerk, U.S. Bankruptcy Court
Middle District of Pennsylvania
Wilkes-Barre

Form 1340 (12/19)

APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

1. Claim Information

For the benefit of the Claimant(s)¹ named below, application is made for the payment of unclaimed funds on deposit with the court. I have no knowledge that any other party may be entitled to these funds, and I am not aware of any dispute regarding these funds.

Note: If there are joint Claimants, complete the fields below for both Claimants.

Amount:	\$243.00, \$147.90, \$324.00
Claimant's Name:	Crystal Irene (Wood) Pennington
Claimant's Current Mailing Address, Telephone Number, and Email Address:	124 Gun Club Road New Oxford, PA 17350 Crystalcats309@gmail.com (717)-434-9783

2. Applicant Information

Applicant² represents that Claimant is entitled to receive the unclaimed funds because (*check the statements that apply*):

- ☒ Applicant is the Claimant and is the Owner of Record³ entitled to the unclaimed funds appearing on the records of the court.
- ☐ Applicant is the Claimant and is entitled to the unclaimed funds by assignment, purchase, merger, acquisition, succession or by other means.
- ☐ Applicant is Claimant's representative (e.g., attorney or unclaimed funds locator).
- ☐ Applicant is a representative of the deceased Claimant's estate.

3. Supporting Documentation

- ☒ Applicant has read the court's instructions for filing an Application for Unclaimed Funds and is providing the required supporting documentation with this application.

¹ The Claimant is the party entitled to the unclaimed funds.

² The Applicant is the party filing the application. The Applicant and Claimant may be the same.

³ The Owner of Record is the original payee.

4. Notice to United States Attorney

☐ Applicant has sent a copy of this application and supporting documentation to the United States Attorney, pursuant to 28 U.S.C. § 2042, at the following address:

Office of the United States Attorney
Middle District of Pennsylvania
William J Nealon Federal Bldg & Courthouse
235 N Washington Ave, Ste 311
Scranton, PA 18503

5. Applicant Declaration

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: 9-14-22

Signature of Applicant

Printed Name of Applicant

Address:

Telephone:

Email:

5. Co-Applicant Declaration (if applicable)

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: _____

Signature of Co-Applicant (if applicable)

Printed Name of Co-Applicant (if applicable)

Address:

Telephone: _____

Email: _____

6. Notarization

STATE OF Pennsylvania

COUNTY OF York

This Application for Unclaimed Funds, dated 9/14/22 was subscribed and sworn to before me this 14 day of Sept, 2022 by

Crystal Pennington

who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument. WITNESS my hand and official seal.

(SEAL)

Notary Public Stephanie Rose Ream (SEAL)

My commission expires:

06/04/2025

6. Notarization

STATE OF _____

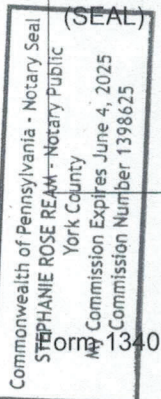
COUNTY OF _____

This Application for Unclaimed Funds, dated _____ was subscribed and sworn to before me this _____ day of _____, 20____ by

who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument. WITNESS my hand and official seal.

Notary Public _____

My commission expires:



Cindy Boyle

From: web@pamb.uscourts.gov on behalf of PAMB Web <web@pamb.uscourts.gov>
Sent: Thursday, September 15, 2022 8:04 PM
To: PAMBml_fax
Subject: EDSS filing from Crystal Pennington for on Thursday, September 15, 2022 - 20:03

Submitted on Thursday, September 15, 2022 - 20:03 Submitted by user: Anonymous Submitted values are:

Filer's Name: Crystal Pennington

Debtor's name (if different):

Filer's EMail Address: crystalcats309@gmail.com Filer's Phone Number: 17174349783 Case number (if known): 20-03630

==Documents==

Document 1:

https://www.pamb.uscourts.gov/system/files/webform/edss/bck09152022_0001.pdf

Document description:

==More Documents==

Document 2:

https://www.pamb.uscourts.gov/system/files/webform/edss/bck09152022_0002.pdf

Document 2 description:

Document 3:

https://www.pamb.uscourts.gov/system/files/webform/edss/bck09152022_0003.pdf

Document 3 description:

Document 4:

https://www.pamb.uscourts.gov/system/files/webform/edss/bck09152022_0004.pdf

Document 4 description:

Document 5:

https://www.pamb.uscourts.gov/system/files/webform/edss/bck09152022_0005.pdf

Document 5 description:

By entering my name in the box below, I affirm that I am intending to sign this form with my signature and consent to use this electronic form.: crystal pennington